

Cudahy Health Department Annual Report 2014



Public Health

Cudahy Health Department
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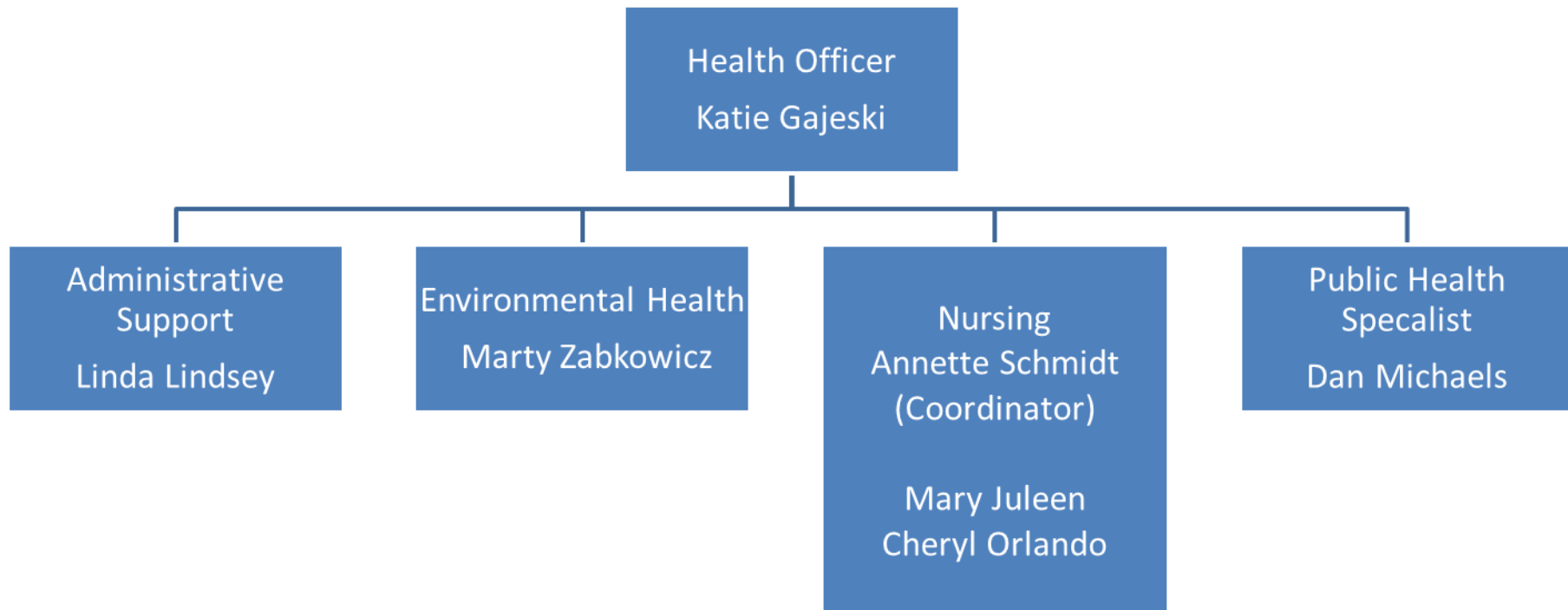
Vision Statement

We envision that all members of the Cudahy community will work together with key resources to ensure optimal health and well-being.

Mission Statement

The Cudahy Health Department's mission is to prevent illness and injury and to promote and protect the health and wellbeing of the Cudahy community.

2014 Cudahy Health Department Organization Chart



Health Officer's Report to the City of Cudahy:

Dear Cudahy Resident,

It is my pleasure to present the 2014 Cudahy Health Department Annual Report, which I prepared in accordance with Wisconsin Administrative Code HS 140.04(3). I would like to thank the Mayor and Common Council for their administrative and fiscal support.

The Cudahy Health Department is required to undergo a review by the Wisconsin Department of Health Services, under DHS 140.06 (1)(b) a Level III local health department will provide or arrange for at least fourteen health department programs or services that address at least seven focus areas in the current state health plan, Healthiest Wisconsin 2020. We gathered, developed, revised and submitted over 90 documents and had an onsite visit in December 2014.

Under my leadership we have restructured the Healthiest Cudahy Collaboration to form a Community Advisory Board and three Task Forces which address the five priority health focus areas as determined by our community. Each Task Force is facilitated by a Public Health Nurse and the Task Forces are developing goals, objectives and indicators for evaluation over the next five years. The Task Forces will be implementing interventions in the early months of 2015.

As your Health Officer, it is my responsibility to ensure the health of all residents of the City of Cudahy as well as a healthy and safe environment for those who live, work, play, and go to school here. I take this responsibility very seriously. But, I cannot do this alone. In the coming months and years, I will be reaching out to community residents, business leaders, elected and appointed officials, and other leaders in our schools, faith community, health care organizations, community groups, and beyond. Together, I believe we can fulfill a vision of a healthy, safe, and sustainable community.

I look forward to working with you to achieve this vision.

Sincerely,

Katie M. Gajeski, MS

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Core Public Health Functions and Essential Public Health Services

By statute, Wisconsin's public health system is organized around three core functions and 10 essential services. State and local health departments in Wisconsin are required by law to make certain that three core public health functions and 10 essential public health services are available to all people in Wisconsin. Wisconsin's public health system refers to coordinated working relationships between governments, private, public and voluntary agencies, organizations, sectors, and communities. Working within this framework and collaboratively, we strive to achieve the goals of Healthiest Wisconsin 2020: Everyone Living Better, Longer.

Core Function: Assessment

Assessment means all activities involved in community diagnosis such as disease surveillance, identifying current and emerging needs, analyzing the underlying cause of problems, collection and interpreting data, case finding, monitoring and forecasting trends, research and evaluation of outcomes

1. Monitor health status to identify and solve community health problems.
2. Diagnose and investigate health problems and health hazards in the community.

Core Function: Policy Development

Policy development means the process by which communities make decisions about problems, choose goals and proper means to reach them, handle conflicting views about what should be done, and allocate resources.

3. Inform, educate, and empower people about health issues.
4. Mobilize community partnerships and action to identify and solve health problems.
5. Develop policies and plans that support individual and community health efforts.



CDC, 10 Essential Public Health Services
<http://www.cdc.gov/nphps/essentialservices.html>

Core Function: Assurance

Assurance means to make certain that necessary services for a community are provided to reach agreed upon goals, either by encouraging public, private, non-profit, civic, and voluntary sector action, by requiring services directly.

6. Enforce laws and regulations that protect health and ensure safety.
7. Link people to needed personal health services and assure the provision of health care when otherwise unavailable.
8. Assure competent public and personal health care workforce.
9. Evaluate effectiveness, accessibility, and quality of personal and population-based health services.
10. Research for new insights and innovative solutions for health problems.

Prenatal Care Cudahy Program (E.S. 1,3,7, 9)

A total of 186 births were recorded in 2014 for the City of Cudahy which represents a 9.5% decrease from 2013. The average estimated gestational age for infants born to Cudahy women was 37 weeks with the recommended gestational age to be at least 39 weeks. A single set of twins was born in 2014. The one infant death occurred in 2014 and was attributed to a preterm birth. In 2014, 10 women under the age of 19 gave birth to an infant and the average age of women who gave birth was 29 which represent an increase of approximately 2 years as compared to 2013. WIC participation as reported on birth record reports reflects a decrease as compared to previous years. No information was provided for this decline. The WIC program served 343 participants at the Cudahy location in 2014. A large increase was noted in 2014 regarding breastfeeding as the preferred method of feeding at the time of hospital discharge.

Each infant born to a Cudahy resident receives a “Welcome Baby” letter from the Health Department. This letter contains information on immunization, infant safe sleep practices, community support services for the new family, identifying lead hazards, prevention measures for Shaken Baby Syndrome, and resources for the new mother regarding postpartum depression. Also included in the letter is a coupon redeemable at the health department for a hand crafted baby blanket and hat created by volunteers and baby’s first book available at the Cudahy Family Library.

Table 1. Prenatal and Birth Outcomes, City of Cudahy			
	2012	2013	2014
Births per Year, frequency	223	205	186
Females	113	101	103
Males	110	104	83
Breastfed on Discharge, frequency	164	99	144
Infant Death, frequency		1	1
Gestation in Weeks, annual average	38.82	38.21	37.65
Mother's Age, average (started 2013)		27.9	29.05
Teenage Mothers \leq 19, frequency (started 2013)		12	10
Twins per Year	4	5	1
Birth Weight, annual average in lbs.	7.34	7.27	6.08
WIC Participants (started 2011)	94	85	57

Nurse of the Day Information & Referral (E.S.2,3,7)

The nurse of the day is responsible for managing walk-in clients and phone calls that require nursing assessments and interventions. Public health nurses provide answers to health related questions, direct callers to health resources, and make referrals each day during business hours. Such information and referral is often the first point of contact with clients; it is one of the most visible services provided. Typical nurse of the day activities may include obtaining information and providing education and resources for animal bites, environmental complaints, illness complaints/health concerns, blood pressure checks, immunization records, access to care issues, and much more.

Women, Infants & Children Project (E.S. 1,3,4,7)

WIC is a program to prevent nutrition-related health problems and to improve the health status of low-income, at-risk pregnant/breastfeeding women, infants, and children. The Cudahy Health Department served as the fiscal agent for the Cudahy WIC Project beginning in 2006. However, in July of 2014 Cudahy entered into an agreement with the West Allis

Health Department WIC Program to provide WIC services at the Cudahy Health Department. This change allows the WIC program to remain viable for the community, and all of the WIC clients serviced by the Cudahy Health Department.

Communicable Disease Surveillance and Control (E.S. 1,2,3,6)

Wisconsin State Statute 252.03 states that a local health department “upon the appearance of any communicable disease in his or her territory shall immediately investigate all circumstances and do what is reasonable for the prevention and suppression of disease.” Chapter DHS 145 lists 80 reportable diseases in the State of Wisconsin.

The number of communicable disease investigations in 2014 was comparable with 2013 with both years totaling 189 investigations. Chlamydia continues to be the most reported communicable disease as in previous years, reflecting trends in the county, state and nation.

Table 2. Investigated Communicable Disease, City of Cudahy				
Diseases	2012	2013	2014	Totals
Campylobacter	2	6	3	11
Chlamydia	66	66	69	201
E Coli	0	5	1	6
Giardia	2	3	6	11
Gonorrhea	10	12	9	31
Hepatitis A	1	1	2	4
Hepatitis B	4		2	6
Hepatitis C	20	11	19	50
Influenza	1	26	25	52
Kawasaki	0	1	0	1
Legionaires	0	1	0	1
Lyme	4	7	4	15
Measles	1	0	1	2
Meningitis	3	1	0	4
Mononucleosis	0	1	0	1
Mumps	0	0	9	9
Other	0	0	1	1
Pertussis	34	21	6	61
Rubella	0	0	1	1
Salmonella	0	3	1	4
Shigella	1	2	1	4
Shingles	2		1	3
Strep	9	8	6	23
Syphilis	1	1	0	2
Tuberculosis (Total)	17	10	12	40
Active disease	1	0	1	2
Investigated, not a case	1	1	0	4
Latent Infection	9	7	4	20
MOTT (mycobacterium other than Tuberculosis)	6	2	7	14
Varicella	7	3	10	20
West Nile Virus	1	0	0	1

In 2014, several Midwestern states saw an increase in cases of mumps, particularly in college aged students. The level of suspicion and testing for mumps increased during this time frame. The Cudahy Health Department conducted 9 mumps investigations. Of these 9, 3 individuals were reported to the Cudahy Health Department by the Southeastern Regional Office of Health as contacts to a confirmed case of measles who resided in another community. Public health nurses investigated the type of exposure and client's immunity status, monitored the client for symptoms, provided education, and when necessary, proper immunization. None of these 3 individuals contracted mumps. The remaining 6 investigations of suspect mumps demonstrated symptoms of parotid swelling. Further investigation revealed other causes for the parotid swelling and laboratory testing did not support the diagnosis of mumps.

The last week of December 2014, Cudahy saw a peak in hospital associated influenza. During this week, seven cases ages ranging 52-87 years of age and an average age of 71 were identified. This peak in activity and age range was consistent with influenza activity in the Southeastern region of Wisconsin. Information on influenza vaccination for these individuals was not available.

On November 17, 2014, The Cudahy Health Department received a call from a residential care facility expressing concern over a sudden increase in gastrointestinal illness. The rapid onset, short duration, and identified symptoms led the health department to suspect a norovirus outbreak. Control measures were recommended immediately and ongoing investigation and stool samples confirmed the diagnosis of norovirus. A total of 37 people became ill, consisting of 18 out of 36 staff and 19 out of 32 residents. On site visits and interviews revealed minor areas for prevention of further illness. Recommendations to address these areas were made to management staff. The facility was provided with current manuals outlining the prevention and control of norovirus outbreaks in long-term care facilities. An in person meeting between public health and key management, care, and housekeeping staff highlighted the most salient points of the manual. A hand washing and norovirus in-service provided by health department staff, is being made available to the facility.

The Cudahy Health Department received notification of an active case of Tuberculosis in the final weeks of 2014. This individual resides in another municipality but works in Cudahy. The Cudahy Health Department collaborated with the other local health department and the worksite to conduct an investigation, provide education, and worksite messages for release to employees. Thirty individuals were identified as contacts to the case. The investigation required 28 hours of staff time through December 2014 and will require an additional 40-50 hours of staff time in 2015. Thus far none of these individuals have tested positive to tuberculosis. Final testing and investigation are ongoing and should be concluded in the first quarter of 2015.

Of the Three suspect TB cases one was determined to be tuberculosis infection (also called latent tuberculosis infection), another mycobacterium other than tuberculosis infection, and another culture negative case of active TB. The Cudahy Health Department provided case management, direct observed therapy, and medication management for 5 residents with tuberculosis infection. The culture negative case of active tuberculosis received case management, direct observed therapy, medication and medication management for the completion of her course of therapy. Risk of spread to others was extremely low and the contact investigation did not identify any positive tests among contacts. All of the clients followed for medication management successfully completed their course of therapy.

Immunization Clinics (E.S. 1,3)

The Cudahy Health Department Immunization clinics are held on the second Tuesday of every month from 2-4 PM. Clients not covered by BadgerCare are charged \$15.00 per clinic visit based on their ability to pay. Vaccine administration is not withheld if this charge is a burden for the family. BadgerCare is billed for each vaccine provided as well as an administration charge. Through the Vaccine for Children program, the CHD is able to administer vaccine to

children that are 18 years of age or younger, have no insurance, are on BadgerCare, are Native American or Alaska Natives.

In 2014, the Health Department saw a slight increase in the number of children on Badgercare receiving their vaccines during our immunization clinics. The reason given most often by the parent or guardian for attending our clinic was less wait time and closer to home. In 2014, our clinics did not provide vaccines to any infant age 0-11 months. This trend could be the result of better attended well baby office visits where recommended vaccines are administered by the private provider.

Table 3. Immunizations per Insurance Status, Vaccine For Children Program						
YEAR	UNKNOWN Ins status	Insured Vaccine Covered	Badgercare	No Insurance	Native American Alaskan native	Insured No vaccine
2012	3 Imms/1Client	62 Imms/35 Clients	214 Imms/67 Clients	24 Imms/10 Clients	None	30 Imms/14 Clients
2013	12 Imms/2 Clients	6 Imms/3 Clients	110 Imms/36 Clients	21 Imms/10 Clients	None	4 Imms/3 Clients
2014	5 Imms/2Clients	None	126 Imms/ 41 Clients	20 Imms/9 Clients	8 Imms/2 Clients	None

The Immunization Action Plan (IAP) Grant focuses on raising the immunization rates of children 24 months of age living within our Cudahy Community. Benchmark immunizations for this age include: 4DTaP/3HepatitisB/3HiB/1MMR/3Polio/4Pneumococcal/1Varicella.

The grant objectives direct the health department to contact parents/guardians with information regarding their child’s recommended immunizations either by mail or telephone. Enlisting the assistance of the child’s primary care provider is also encouraged. Vaccines are then provided by the health department or private provider.



Success of interventions taken by the health department are measured using Wisconsin Immunization Registry (WIR) Benchmark Reporting occurs after all members of the cohort turn 24 months of age with progress towards reaching 90% over subsequent years of grant participation. In 2014, the percent of 24 month children who met all benchmark criteria had increased by 9%.

Table 4. Immunization Rates for IAP Grant, City of Cudahy		
Year of Birth	Year Turn 24 months	Benchmark % Criteria Met
2010	2012	67%
2011	2013	73%
2012	2014	82%

The Cudahy Health Department contracts with Wheaton Franciscan Home Health Services for the delivery of our community influenza (‘flu’) clinic located in the Cudahy Common Council chambers. Working collaboratively with the assistance of Cudahy volunteers, influenza vaccine is provided to our community members. Additionally, food for *Project Concern* was collected from participants. The 2014 flu clinic saw another decrease in the amount of vaccine administered to community members. The availability of the vaccine in numerous venues throughout the city and the addition of vaccine coverage through the Affordable Care Act may help to explain the decrease.

School District of Cudahy—Public Health Nursing Services (E.S. 1,2,3,4,6,7)

The School District of Cudahy and the Cudahy Health Department have been operating under an agreement “to provide cost effective school nursing services to the School District of Cudahy as well as further the collaborative relationship that is mutually beneficial to both entities.” A Cudahy Public Health Nurse works approximately 20 hours/week during the school year to provide health education and coordinate necessary services that will benefit the School District’s students with special health care needs. In return, the School District-reimburses the Health Department for the Public Health Nurse’s services in the schools.

The Public Health Nurse works collaboratively with the school health aides to collect and perform data entry of immunization information into the Wisconsin Immunization Registry. The PHN monitors school immunization compliance. The State mandates 99% immunization compliance by the 40th day of school.

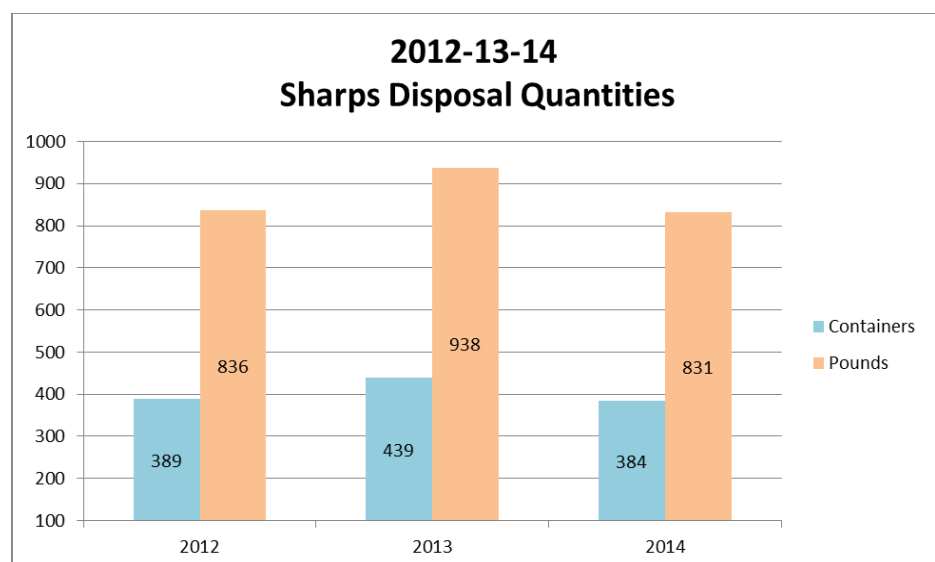
Table 5. School Immunization Compliance (%)		
School Year	School District of Cudahy	St. Paul Evangelical Lutheran School
2011-2012	97.33%	100%
2012-2013	98.91%	99.04%
2013-2014	99.29%	100%

Refugee Health Program (E.S 1,2,3,4,5,6,7)

The Wisconsin State Refugee Health Program decided to change its structure in the fall of 2014. The objective was to put in place a system where refugees get screened by a medical provider and the provider can then become their medical home. During this restructuring process WI DHS decided that Cudahy would no longer serve as a grant recipient. Although the Cudahy Health Department no longer holds a WI refugee health state grant, we remain committed to maintaining the relationships we have developed with local resettlement agencies and providers, and continuing collaborative efforts to meet our refugee client’s needs. The Cudahy Health Department will continue to serve our refugee population providing the same level of excellent services it does to all our residents.

Sharps Disposal & Medication Collection Program (E.S. 2,3,4,6)

The CHD continues to dispose of household sharps and syringes for Cudahy residents and medical waste collected by the Cudahy Police Department. The Health Department has been designated as a “Drop-Off Site” by the Wisconsin Department of Natural Resources. Sharps are only accepted in DNR-approved containers during normal Health Department hours. They are sent for incineration with the Health Department’s needles and syringes on a monthly basis.



The Cudahy Police Department houses a locked medication box, where residents can dispose of unused and unwanted medications. This program is essential for keeping these medications off the streets and pharmaceutically active chemicals out of waterways, and ultimately, our municipal drinking water. A total of 411, 578, and 1193 pounds of waste were collected for each of the respective reporting years.

Environmental Health Licensing and Inspection Program (E.S. 1,2,6)

For thirteen years, the Cudahy Health Department has been a member of the Environmental Health Consortium with the health departments of South Milwaukee and St. Francis. The Cudahy Health Department is an agent of the state of Wisconsin Department of Health Services and the Department of Agriculture, Trade and Consumer Protection. The Consortium members share Environmental Health Specialists, one full-time and one part-time, who are Registered Sanitarians. In 2014, there were 41 more food inspections than in 2013. The more inspections conducted, the more likely staff will have to follow-up on the inspection because orders are generally written therefore a re-inspection is required. One of the Environmental Health Specialists also oversees the Cudahy Weights and Measures program, which ensures the accuracy of scales used to measure food items.

Table 6. Environmental Health Licensing and Inspection Program, City of Cudahy			
	2012	2013	2014
Food related inspections	134	104	145
Food related re-inspections	66	60	93
Farmers Market/Temporary Events	4	5	5

Environmental Health Complaint Investigation (E.S. 2,3,4, 6,7)

The Environmental Health Specialist also investigates environmental health nuisance complaints. These complaints include garbage storage issues, pest activity, indoor and outdoor air quality, and other potential public health hazards. In 2014, we received 15 fewer citizen nuisance complaints than in previous year. The Environmental Health Specialist is then able to spend more time inspection food establishments.

Table 7. Environmental Health Complaint Investigation, City of Cudahy			
	2012	2013	2014
Nuisance complaint investigations	85	70	55
Animal bite quarantine & rabies prevention	29	29	30
Home investigations of a child with lead poisoning	2	0	1
Scale inspection of businesses (Accurate / Tested)	25/28	26/28	27/28
Timing devices in Laundromats (Accurate / Tested)	65/66	66/66	66/66
Verified Scanners in businesses (Accurate / Tested)	192/200	388/400	240/250

Animal Bites: (E.S. 1,2,4,6,7)

The City had a total of 102 animal bites from 2012-2014 and averaged approximately 34 animal bites per year. In 2014, there were 37 animal bites. A total of 80 (78%) bites were caused by dogs. There were also bites from animals such as a bats and skunks.

The Public Health Nurses continue to work closely with the Cudahy Environmental Health Specialist, the Cudahy Police Department, and the Emergency Department at St. Luke's South Shore Hospital to ensure that the offending animal is quarantined, immunized, and licensed. The CHD also works with the individuals who were bitten to ensure that they seek needed medical care.

Lead Poisoning Prevention (E.S. 1,2,3,7)

With 35.1% of Cudahy housing built prior to 1950 (Census Bureau, American Community Survey, 2013), blood lead poisoning in children is a significant public health risk. In 2012-2014, the total number of lead test results reported for each year was as follows: 411, 404, and 304. The total number of children with a lead level of 5 or above was 18, 21, and 8 for each respective year. In May, 2012, the CDC decreased the level of concern from 10 µg/dL to 5 µg/dL, but state law has not changed accordingly as of the publication of this report. Research shows that elevated blood lead levels in children in the range of 5 to < 10 µg/dL have a steeper decrement in cognitive function than children in the 10-20 µg/dL range. As a result, the CHD has added the additional service to address this population by sending a letter home to the parent/guardian to inform them of their child's elevated blood lead level and lead educational materials. The CHD recommends a repeat venous blood level within 3 months as suggested by the Wisconsin Childhood Lead Poisoning & Prevention Program. This letter also offers a lead cleaning kit, the use of a high-efficiency particulate air (HEPA) vacuum and additional lead education provided by a PHN during an office visit or via home visit.

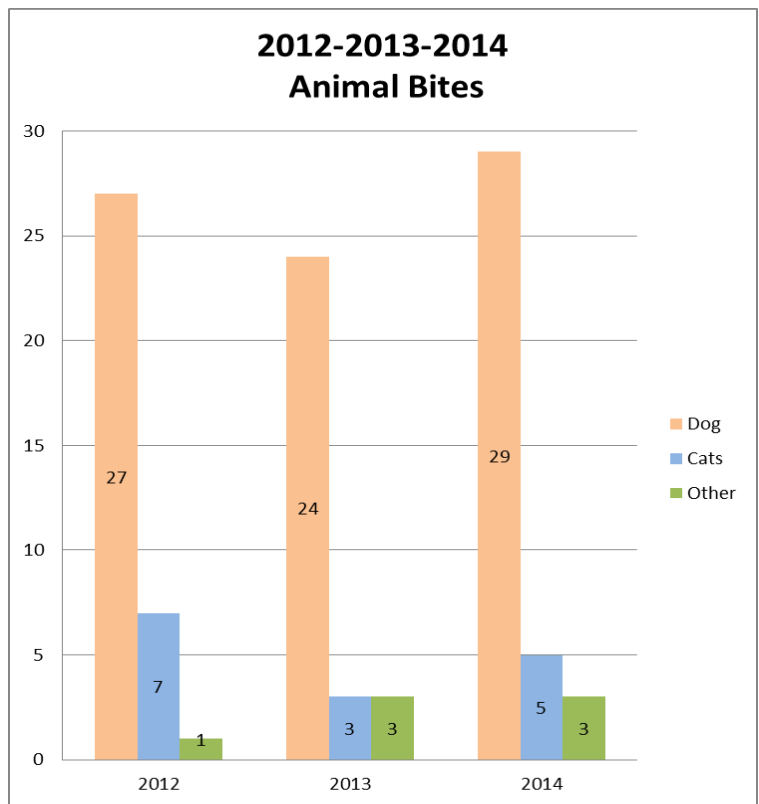


Table 8. Number of Cudahy Children With Newly Reported Elevated Lead Levels			
Lead Level	2012	2013	2014
5 to <10	14	17	6
10 to <15	2	1	1
15 to <20	1	2	0
>20	1	1	1
Total	18	21	8

Public Health Preparedness & Response: (E.S. 1,2,4,5,6,9)

The City of Cudahy Health Department continues to plan, prepare and respond to public health emergencies that occur within the City in collaboration with local and regional partners. The department is the 2014-2015 Chair of the Milwaukee-Waukesha County Consortium for Emergency Public Health Preparedness. Cudahy Health Department also participates in a number of public health preparedness grants including the Cities Readiness Initiative (CRI) and the Public Health Emergency Preparedness (PHEP).

Each of these grant programs have specific negotiated objectives and activities. The CRI grant objectives relate to identifying and opening mass clinics for medication and vaccine delivery. The Cudahy Health Department participated in the Bacillus Anthracis Threat 2013 (BAT 14) functional exercise to practice communication skills and coordination efforts with the state needed to organize a mass clinic. The Cudahy Health Department volunteered to be on the design team for BAT functional exercise in 2015. The PHEP grant focuses on general areas of public health preparedness using an all-hazards approach with training on use of personal protective equipment, applications of National Incident Management System, etc.

The Cudahy Health Department continues to engage the community in preparedness education. With partnerships with the Cudahy Community Block Watch and North Shore Bank, The CHD was able to educate the community on the importance of self preparedness.

Safety and Injury Prevention (E.S. 3,4)

A member of the Cudahy Health Department team is a certified Child Passenger Safety Seat Technician, through Safe Kids of Southeast Wisconsin Coalition. In 2014 19 Child passenger seats were distributed to Cudahy residents. In addition approximately a total of 38 car seat checks were performed for Cudahy residents in 2014.

The Cudahy Health Department partnered with the Cudahy Police Department at the Cudahy National Night Out to hold a bicycle helmet fitting event. Working together, a total of 100 free bicycle helmets were sized and fitted to children 3 years of age and older. Parents were instructed on how to properly fit and use the helmet. Bicycle safety information was also shared. The bike helmets were donated this year and previous years by the law firm of Habush Habush & Rottier in partnership with Safe Kids of Southeastern Wisconsin. Habush Habush & Rottier continues to support communities; however in 2015 there charitable contributions will no longer focus on child bike helmet distribution.

October is National Fire Prevention month. On a designated day, families in Cudahy who order a pizza from Pizza Hut receive a visit from Cudahy firefighters in a fire truck. The firefighters teach the family about fire safety and evacuation plans. If the family's smoke detector is in working order, the family's pizza is free. This program is done in collaboration with the Cudahy Health Department, the Cudahy Fire Department, and the organization, Safe Kids of Southeastern Wisconsin. This program has occurred for a number of years.

Healthiest Cudahy Collaboration: (E.S. 1,3,4,5)

The Healthiest Cudahy Collaboration is a partnership of Cudahy organizations focused on improving the health of all Cudahy residents. The Collaboration contains 96 members including elected officials, municipal departments, area

businesses, non-profit organizations, and Cudahy residents. In 2014, the Cudahy Health Department conducted a survey to determine which of the focus areas from the state health plan, *Healthiest Wisconsin 2020* were important to the community. A total of 97 individuals participated in the survey. The five health priorities selected based on survey responses from the community along with qualitative and quantitative input provided by collaboration members. Three Task Forces were developed to address the top health priorities: Substance Abuse & Mental Health, Physical Activity & Nutrition and Health Growth & Development. Each task force is facilitated by a Public Health Nurse and meets monthly. In December 2014, each Task Force began developing goals, objectives and indicators for evaluation. The specific interventions selected by the Task Forces are based upon best practices, clinical standards and research. All members of the collaboration are invited to attend the Community Advisory Board meetings which are held quarterly.

Table 9. Cudahy Health Department Health Priority Survey Results	
Adequate, appropriate, safe food and nutrition	35.05%
Alcohol and other drug use	73.20%
Chronic disease prevention & management	26.80%
Communicable disease prevention & control	30.93%
Environmental & occupational health	28.87%
Healthy Growth & Development	41.24%
Injury and Violence	34.02%
Mental Health	58.76%
Oral Health	5.15%
Physical Activity	36.08%
Reproductive and Sexual Health	7.22%
Tobacco use and exposure	21.65%

Public Health Preceptorship Program (E.S. 4,8)

The Health Department continued an active mentoring program in public health and hosted multiple students during in 2014. The students came from a variety of institutions including Carroll University, Marquette University, and UW-Milwaukee. The students were working towards different degrees including BSN Completion, BSN, and Bachelors of Science in Public Health. They assisted in a variety of projects including public health nursing, community education, school nursing, community health assessment and emergency preparedness.